Preventing and Reducing Stigma:

Education



Why Does it Matter?

Approximately ten million secondary education students require professional help due to a mental health condition.

Depression, anxiety, attention-deficit hyperactivity disorder, and bipolar disorder are the most common mental health conditions affecting high school students. Staff and faculty are on the front lines when it comes to supporting students who have mental illnesses. School staff and faculty need ongoing training on the mental health issues affecting students. With direct and daily interaction with students, educators and other school personnel have an excellent opportunity to carry out systems that will prevent mental health crises in educational settings.

Students with mental health or SUDs are more likely to experience in-person and cyber-bullying than other students. Unfortunately, many students with mental health disorders lack access to professional help. Untrained educators and staff may end up reacting to students rather than taking a proactive approach. Due to the scarcity of resources and support, educators and staff are often forced to separate students who need greater attention or cause distractions.

Few teaching and training programs prepare educators and staff to work with students who have a mental health or SUD. Many training programs may perpetuate misconceptions about these students' needs. When they do not perform well, students with behavioral health issues can be labelled as "bad," furthering the disconnection.

Schools are often the first contact for students with SUD/mental illness. Destignatizing mental illness and SUD can allow students to get the educational accommodations and supports they need (e.g., leave of absence, specialized instruction).

What is the Impact?

- In some educational settings, as few as one in four college students with mental health or SUD seek campus services. When they do reach out, they are more likely to receive inadequate services or experience delays.
- Potential returning students in recovery from SUD may not return due to a perceived lack of understanding of the risks of returning to a high-risk educational setting and lack of recovery-specific services that can support them.
- Students with mental health problems are often segregated from other students, furthering gaps in knowledge and socialization.
- School dropouts and subsequent unemployment are significant consequences of stigma.
- Self-stigma and reluctance or failure to disclose mental illness or SUD.
- Few school counselors to address these issues (structural stigma due to lack of funding).

What Can We Do?

- Educate students with mental health and SUDs about coping strategies.
- Include mental health issues, SUDs, and recovery in teacher and staff training programs. Provide opportunities for educators and staff to hear from individuals with behavioral health challenges.
- Help educators and staff understand the relationship between early trauma and behavioral health. Provide training on the impact of trauma on student behavior. implement trauma-informed educational practices.
- Promote anti-stigma campaigns in schools.
- Support academic accommodations for mental illness/SUD.



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Resources

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Online Learning: Addressing Stigma and Substance Use Disorders: A HealtheKnowledge Course



Web page: Great Lakes PTTC, Preventing and Reducing Stigma



Supporting Student Mental Health: Resources for Educators

Educators and school personnel play a vital role in promoting mental health and wellbeing and identifying and responding to emerging mental illness in children and adolescents. However, they often have not received the education, training, and/or ongoing support needed to respond in the classroom.

The MHTTC Network and the National Center for School Mental Health at the University of Maryland School of Medicine collaborated on an environmental scan and needs assessment of available educator mental health literacy training and resources. Results of the scan were compiled to create the resource guide, Supporting Student Mental Health: Resources to Prepare Educators.



Supporting Student Mental Health: Resources to Prepare Educators:

- · Describes the role of educators in supporting student mental health
- Explains the core components of mental health literacv
- Provides an annotated list of existing resources and trainings that instruct educators on mental health literacy



www.pttcnetwork.org/greatlakes

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References

Ayu, A. P., van der Ven, M., Suryani, E., Puspadewi, N., Joewana, S., Rukmini, E., ... & Schellekens, A. (2020). Improving medical students' attitude toward patients with substance use problems through addiction medicine education. *Substance Abuse*, 1-9.

Borschmann, R., Greenberg, N., Jones, N., Henderson, R. C. (2014). Campaigns to reduce mental illness stigma in Europe: A scoping review. *Die Psychiatrie: Grundlagen & Perspektiven*, 11(1), 43-50. doi:10.1055/s-0038-1670735

Friedrich, B., Evans-Lacko, S., London, J., Rhydderch, D., Henderson, C., & Thornicroft, G. (2013). Anti-stigma training for medical students: the Education Not Discrimination project. *The British Journal of Psychiatry*, 202(s55), s89-s94.

Gill, P. J., & Gill, H. S. (2011). Health advocacy training: Why are physicians withholding life-saving care?. *Medical Teacher*, 33(8), 677-679.

Griffiths, K. M., Carron-Arthur, B., Parsons, A., & Reid, R. (2014). Effectiveness of programs for reducing the stigma associated with mental disorders. A meta-analysis of randomized controlled trials. *World Psychiatry*, 13(2), 161–175. doi:10.1002/wps.20129

Hartrey, L., Denieffe, S., & Wells, J. S. (2017). A systematic review of barriers and supports to the participation of students with mental health difficulties in higher education. *Mental Health & Prevention*, 6, 26-43.

Hettema, J. E., Sorensen, J. L., Uy, M., & Jain, S. (2009). Motivational enhancement therapy to increase resident physician engagement in substance abuse education. *Substance Abuse*, 30(3), 244-247.

Link, B. G., & Phelan, J. C. (2001). Conceptualizing stigma. Annual Review of Sociology, 27(1), 363-385.

Livingston, J. D., Milne, T., Fang, M. L., & Amari, E. (2012). The effectiveness of interventions for reducing stigma related to SUDs: a systematic review. *Addiction*, 107(1), 39-50.

Parcesepe, A. M., Cabassa, L. J. (2013). Public stigma of mental illness in the United States: A systematic literature review. *Administration and Policy in Mental Health and Mental Health Services Research*, 40(5), 384-399. doi:10.1007/s10488-012-0430-z

Patten, S. B., Remillard, A., Phillips, L., Modgill, G., Szeto, A. C., Kassam, A., & Gardner, D. M. (2012). Effectiveness of contact-based education for reducing mental illness-related stigma in pharmacy students. *BMC Medical Education*, 12(1), 120.

Milin, R., Kutcher, S., Lewis, S. P., Walker, S., Wei, Y., Ferrill, N., & Armstrong, M. A. (2016). Impact of a mental health curriculum on knowledge and stigma among high school students: a randomized controlled trial. *Journal of the American Academy of Child & Adolescent Psychiatry*, 55(5), 383-391.

Mu, L., Shroff, F., & Dharamsi, S. (2011). Inspiring health advocacy in family medicine: a qualitative study. *Education for Health*, 24(1), 534.

Riffel, T., & Chen, S. P. (2020). Exploring the knowledge, attitudes, and behavioural responses of healthcare students towards mental illnesses—a qualitative study. *International Journal of Environmental Research and Public Health*, 17(1), 25.

Silins, E., Conigrave, K. M., Rakvin, C., Dobbins, T., & Curry, K. (2007). The influence of structured education and clinical experience on the attitudes of medical students towards substance misusers. *Drug and Alcohol Review*, 26(2), 191-200.

Xiao, H., Carney, D. M., Youn, S. J., Janis, R. A., Castonguay, L. G., Hayes, J. A., & Locke, B. D. (2017). Are we in crisis? National mental health and treatment trends in college counseling centers. *Psychological Services*, 14(4), 407.

